

## **PARTICIPATION FORM**

Saturday, April 23, 2016 9:00am-Noon Twin Pines Park-Belmont, CA

(Please Print)	
Name of Organ <mark>ization:</mark>	
Address:	
Name of Contact Person:	
Phone: Emai	l:
(Fill in all that apply) Booth Outreach Material or Message:	
Type of display/exhibit	
Hands-on activities at booth	
If food or drink station, what are you serving?	
	(no alcohol allowed)
All stations are supplied with one 5-foot table and	2 chairs. Please indicate if you require additional
No Yes, we would like additional	table(extra) chairs(extra)
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	lloons, as they tend to fly loose and end up as eys, potentially harming fish and wildlife.
2. Participants may arrive early for statio	n set-up. The event starts at 9:00am.
3. A confirmation email will be sent to you a	long with directions and station locations.
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Please return completed form to Diane Lynn at <a href="mailto:dlynn@belmont.gov">dlynn@belmont.gov</a> , or by mail:	

City of Belmont
Public Works Department
ATTN: Diane Lynn
One Twin Pines Lane Suite 385
Belmont CA 94002

